

Letter of Intent Guidance

1. Opening Statement of Intent:

- Clearly state the agency's intent to apply for participation in the ASSET process for FY 27-28 cycle
- Name the agency's legal name and any DBA

2. Brief Agency Overview (2-4 sentences max):

- Mission statement
- Year incorporated and how long actively operating in Story County
- 501(c)(3) status

3. Service(s) for Which Funding Will Be Requested (1-2 paragraphs max):

- Name the specific service(s) and identify which ASSET Service Code(s) align with each
- Brief description of who is served
- Geographic reach within Story County

4. Community Need (1 paragraph max):

- Briefly articulate the community need the service addresses
- Reference alignment with the Story County Community Health Needs Assessment and/or ASSET Funder Priorities (name specific priorities if possible)

5. Demonstration of Eligibility (bullet points) – confirm they meet the basic eligibility criteria:

- Nonprofit 501(c)(3) status
- Has articles of incorporation and bylaws
- Has a Board-approved Equal Opportunity Policy
- Has been incorporated and actively serving Story County for at least one year
- Maintains demarcation between religious and secular programs (if faith-based)
- Is governed by a volunteer Board of Directors

6. Service Duplication:

- Do services duplicate other services that already exist in the community?
- If so, provide an explanation of why service duplication is necessary.

7. Contact:

- Provide contact information (name, title, phone, email)

8. ASSET Point of Contact (POC):

- ASSET Admin Assistant is the POC for ASSET
- Send letter of intent and related correspondence to storycountyasset@gmail.com